



CINCLE CONTROL CONTROL OF CONTROL

May 6, 2021

Dr. Arati Mokashi, MD, FRCPC, Pediatric Endocrinologist, IWK Health Centre, Dalhousie University





Traditional Territories Land Acknowledgement

We would like to acknowledge that, in spite of the virtual nature of this presentation, the IWK Health Centre where I am speaking from is located on the ancestral and unceded territory of the Mi'kmaq.





Thanks for attending this event! We're excited you're here!

With this event we want to:

- Share information about our project & findings from our NEW INFOGRAPHIC
- The pathway to access care in Nova Scotia for transgender and gender questioning children and youth
- Answer your questions about this project and any other questions you may have related to trans/non-binary or gender questioning children and youth

Your hosts today are:

Who is joining us today?

- Dr. Arati Mokashi: Pediatric Endocrinologist, Division Head Endocrinology/Diabetes, IWK Health Centre, Dalhousie University
- Nikita Anderson: Research Assistant, Trans Youth CAN!, IWK Health Centre
- Sandra Gotovac: Project Coordinator, Trans Youth CAN! Western University, London, ON



What is the **Trans Youth CAN!** study?

- Looking at <u>medical, social, and</u> <u>family outcomes</u> of trans and non-binary youth referred for puberty blockers or hormones
- 10 medical clinics that provide gender-affirming medical care for youth across Canada
 - All clinics able to prescribe gender affirming hormones
- Recruitment has ended. Data collection is ongoing until Fall of 2021





What is the Trans Youth CAN! study?

- Youth from puberty to age 15 were recruited at their 1st medical appointment for blockers or hormones
 - Followed for 2 years through their journey of gender-affirming medical care
 - Completed surveys and gave permission to get information on their health and clinical care from clinic medical records
- Youth could invite one parent or caregiver to participate in the study
 - Parent or caregiver also respond to surveys
- Participant recruitment and baseline data were from Sept 2017 to June 2019
- 174 youth and 160 parents/caregivers were recruited

Learn all about our study at

www.transyouthcan.ca





Who are the People Served by **Canadian Trans Youth Clinics?** Trans And Non-Binary Youth Under Age 16 In Clinical Care

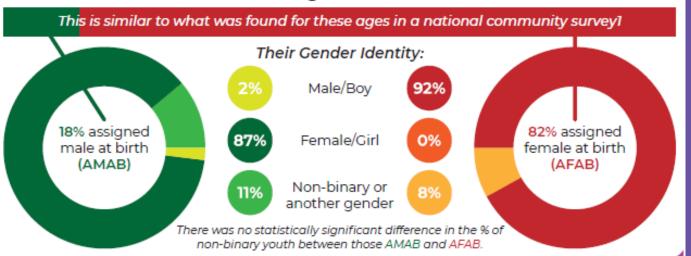
Ethnoracial Background

7% Non-Indiaenous visible minorities

19% Indigenous

74% Non-Indigenous white

Compared to the Canadian population: 5% Indigenous² and 27% visible minorities³



Sex Assigned At Birth:

Other words youth

use to describe

their gender:

Non-binary Demiboy

Cis but questioning

Neither Genderqueer

In the middle of

male and female

Androgynous

Genderfluid

Garcon féminin

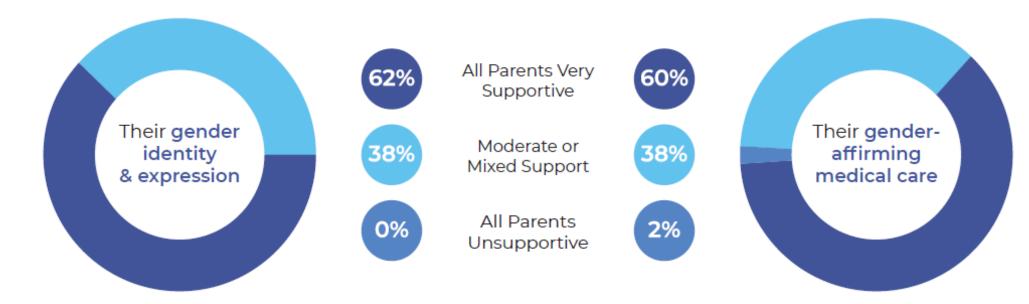
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gender



What youth say about their parents' support for:





Youth whose parents were all very supportive had LESS gender distress¹ than youth who have moderate/mixed support from parents.







Parents'/Caregivers' Worries

82%	Youth facing rejection		
76 %	Youth encountering violence		
75%	Transphobia in general		
66%	Saying the wrong thing to youth		
63%	Youth engaging in self-harm		
53%	Youth's physical health		
51%	Youth may have unsafe dating experiences		
49 %	Making irreversible decisions		
38%	Discussing youth's gender with family		
36%	Youth's fertility		
35%	Youth won't find a good partner		
31%	Disadvantaging your youth by telling people of youth's gender		
26%	What parent is losing with your youth's transition		
24%	How friends/colleagues will react		
20%	Making a mistake by supporting your youth		
19%	Youth won't find good career		
15%	Lack of good health info for youth		
5%	You (parent) being disadvantaged by letting people know your		
	youth's gender		
2%	Youth's gender challenges religious beliefs		

<1% of parents had no concerns.



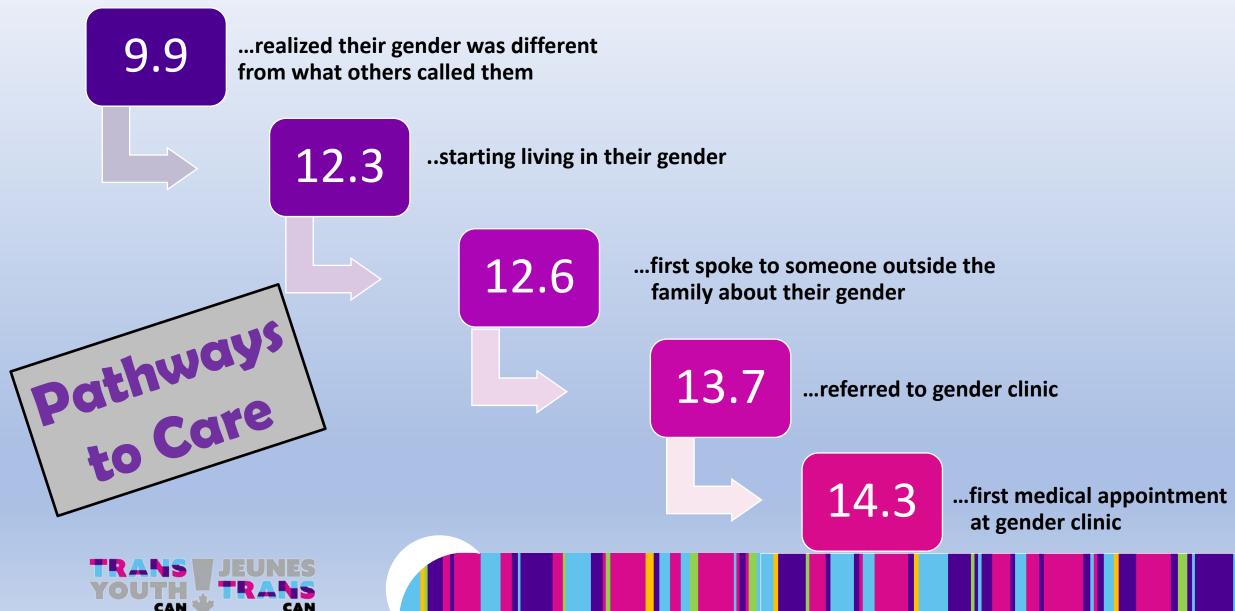
Parents'/Caregivers' Positive Feelings About Youth's Gender

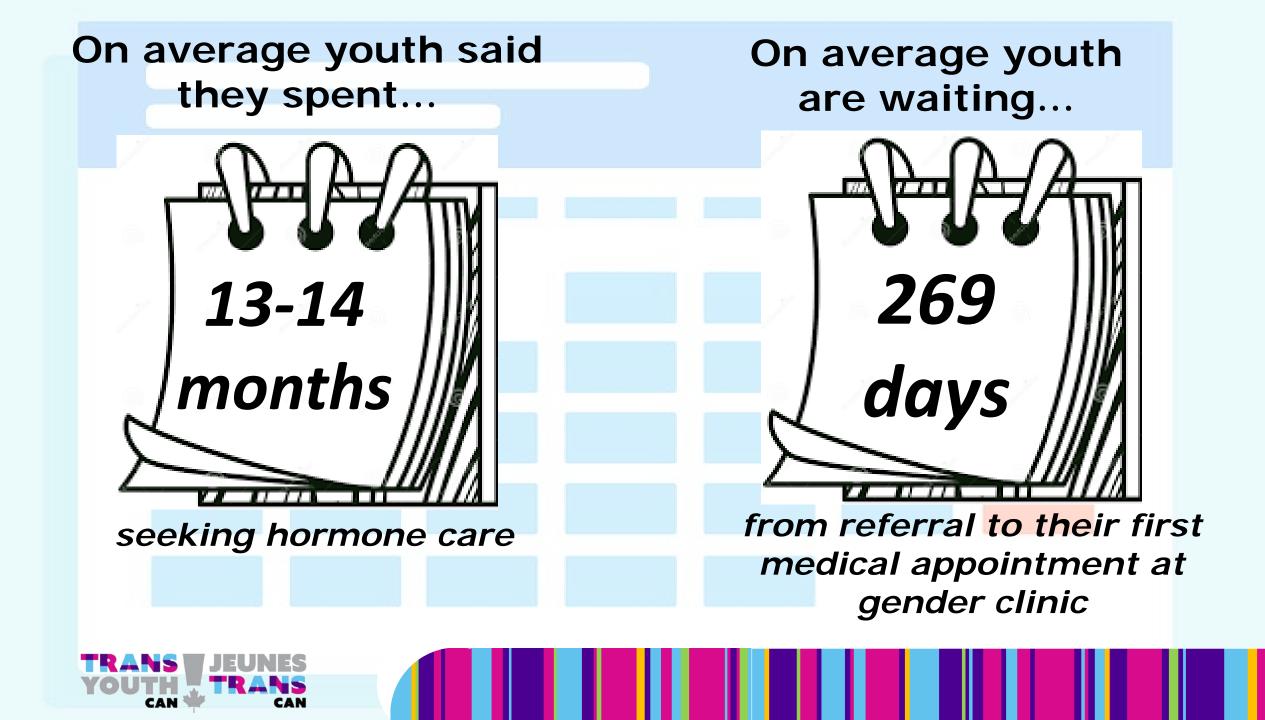
82%	Pride in youth		
70 %	Seeing youth becoming more confident		
60%	Improved relationship with youth		
59 %	Being inspired by youth		
58%	Pleased by unexpected support		
48%	Pride in own parenting		
46%	Hope for youth's future		
44%	Motivation for involvement in public education/advocacy for trans youth		
41 %	Confidence in own parenting		
39%	Strengthening of family		
36%	Sense of personal growth		
27 %	Sense of community with parents of trans youth		
19 %	Reduced family tension		
19%	Addressing you own homophobia/transphobia		

97% reported AT LEAST ONE positive feeling



Average age when youth...





Types of Providers Seen **Before** Gender Clinic

69 %	Family Doctor	
41 %	Psychologist	
34%	School Counsellor	
34%	Another type of Counsellor	
29 %	Pediatrician	
21 %	Psychiatrist	
18%	Community group	
9 %	Adolescent medicine specialist	
5%	Endocrinologist	
4%	Nurse Practitioner	
1%	Indigenous Elder	
<1%	Religious Leader	
< 1 %	Another type of provider not listed	
3%	Saw no other providers about gender	



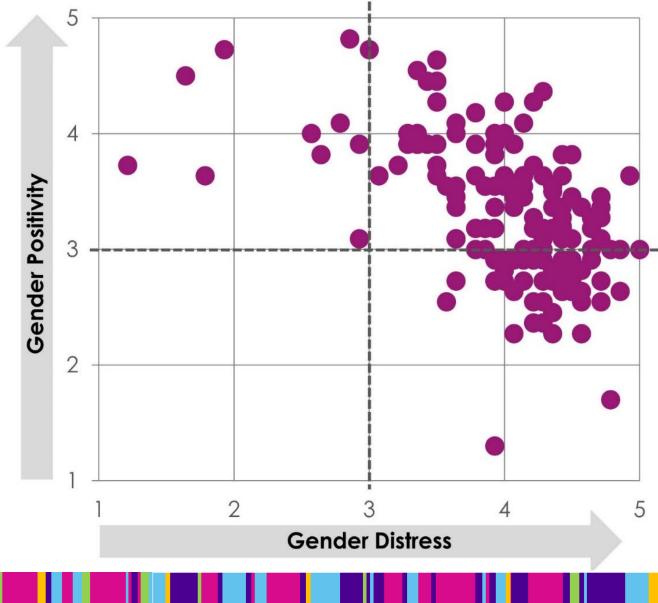
On average youth saw 3 different types of providers, and up to 8 types

Youth pathways to care reminds US...

- Youth spend <u>years</u> on their gender development journey before coming to a clinic for gender-affirming medical care
- Youth face challenges accessing genderaffirming care in Canada:
 - See multiple types of providers before getting to clinic
 - Long wait times to be seen once referred
- **9% of youth** had participated in *some kind of conversion therapy* before coming to the gender clinic
- More timely access to gender-affirming care for trans youth is needed to support them and their families

Gender Positivity and Gender Distress

- At the time of their first medical appointment at clinic (*BEFORE receiving blockers or hormones*)
- Youth were generally *HIGH* on gender positivity AND gender distress
- HIGHER distress related to: Youth Being OLDER at their 1st appointment at clinic





Safety in Schools







10% of youth missed 2+ weeks of school related to their gender due to: mental health, bullying/assault, being outed, misgendering.

68

I was getting misgendered at school and having panic attacks.

A transphobic student in [my] class assaulted [me] physically, and then [the] teachers took the transphobic student's side.

When I first came out, I did not want to go to school as I was afraid of what kids would say as teachers had already told kids what my new pronouns were.

Youth Are Avoiding Places To Prevent Harassment Or Being Outed:

819	6 Washrooms or locker rooms
689	% Gyms, pools, and sports venues
469	% Stores or restaurants
399	% Schools
399	6 Other people's homes
349	6 Social groups or community events
27 9	6 Public transit or travelling
22 9	6 Community or religious institutions
209	8 Public or outdoor spaces
149	6 Avoiding no spaces





Health History

2/3

of youth had at least one other type of diagnosis, other than gender dysphoria including⁵ (youth can have more than 1):

- 45% Anxiety disorder
- 35% Depression/mood disorder
- 23% ADHD
- 6% Autism Spectrum
- 5% Learning or developmental disability

	Total (n=174) %
Self-harm	
Ever	67.6
Past year*	57.2
Suicidality	
Ideation, ever	58.1
Attempt, ever	36.0
Ideation, past year	34.5
Attempt, past year	16.8



A PREVIEW OF SOME DATA FROM OUR NEXT INFOGRAPHIC!

"Disordered Eating (DE) Behaviours"



Disordered Eating (DE) Behaviours Trans and Non-Binary Youth Under Age 16 in Clinical Care

At the time of their first medical appointment at gender clinic...

- •50% of youth said they had ever done something to try to change their body weight/shape
- •19% had done <u>at least one of the following DE behaviours in the last 30 days</u> to change body weight/shape:
 - Dieted (84%)
 - Excessive exercise (73%)
 - Binging (24%)
 - Vomiting (22%)
 - Taken a pill (or something else) (14%)

• With **73%** of these youth saying that wanting to change or control their weight/shape was related to their gender

•O youth had a formal diagnosis of an eating disorder in their medical records

 We found <u>no significant difference</u> in the proportion of transmasculine and transfeminine youth who had done ANY DE behaviour in the last 30 days

Youth engaging in ANY DE behaviour was associated with...

- HIGHER gender distress (overall & body)
- LOWER social connectedness (with school & family)



IWK Transhealth Endocrinology Clinic



- Dr. Arati Mokashi pediatric endocrinologist
- Wendy Murphy endocrine nurse
- Carole Stevens Booking and Registration clerk Endocrine/Diabetes Clinic
- Dr. Tania Wong General pediatrician, shares care of patients and able to start puberty blockers, following some kids separate from IWK clinic
 - Spryfield Family Medicine Clinic



IWK Trans health Endocrinology Clinic

- First patients seen in 2012, over 200 kids
- Currently following 130+ children and adolescents
- This clinic is separate from the IWK mental health, Trans health clinic
- Takes place in the pediatric endocrinology and diabetes clinic area at the IWK Health Centre
- Patients ages pre-puberty to 18 years
- To provide information about gender affirming hormone therapy or to start and monitor patients on gender affirming hormones
- Need the referral to come from family doctor, Nurse Practitioner
 - In fact most referrals come from mental health clinicians can reserve a spot on the waitlist, but need referral from a physician/NP before can book an appointment
 - Wait times are currently 12-14 months but if situation changes while waiting contact your Dr/MH clinician





Pathway to Care in Nova Scotia

- Youth/Parent of child or youth who is gender questioning or identifies in a gender different from that assigned at birth and is seeking support
- Family doctor/nurse practitioner/pediatrician (referral)
- If your doctor is not gender-affirming or knowledgeable resources at end
- Self refer to local mental health services there are now mental health clinicians trained to support and deliver care to gender questioning children and youth in all regions of NS
- Kids Help Phone
 - 1-800-668-6868 or <u>https://kidshelpphone.ca</u>
- Mobile crisis line (NS) 24 hour provincial mental health crisis line
 - 1-888-429-8167





Attempts to reduce wait times

- Pediatricians and family doctors with interest/growing expertise in transhealth
 - NS: Dr. Tania Wong (pediatrician, HRM); Dr. Heidi Budden (Pediatrician,CB)
 - PEI: Dr. Peggy Bethune; Dr. April MacPhee; Dr. Jill Starkes (Pediatricians, PEI)
 - NB: Dr. Robyn LeDrew (pediatric endocrinologist, Saint John); Dr. Rachel Ouellette; Dr. Jennie Smith; Dr. Emily Biden (Pediatricians, Moncton and Fredricton)
 - Family doctors pride health may have a list of doctors taking patients
- Concurrent referral for assessment of gender dysphoria and readiness for hormones - to a mental health clinician and to me
 - Private psychologist option if coverage/finances
- I have started Lupron in straightforward cases without MH assessment



Resources

- School guidance counsellor
- PrideHealth- joint IWK-NSHA initiative <u>https://www.nshealth.ca/content/pridehealth</u>
- On IWK website
 - select <u>Mental Health</u> → Resources → <u>Helpful Websites</u> → <u>Sexual</u>
 <u>Orientation and Gender Identity</u>
- PFLAG Canada: For parents, families and friends of LGBT youth
 - PFLAG Halifax (local resource) <u>https://www.facebook.com/PflagHalifax</u>
 - PFLAG Truro and NEW PFLAG Yarmouth <u>https://www.facebook.com/truropflag/</u>



Current as of: April 23, 2021

Resources

Youth Project: <u>www.youthproject.ns.ca</u>

Facebook group (closed-ask to join):

'Canadian Parents of Trans Kids'

http://www.facebook.com/canadianparentsoftranskids

Simplygoodform – consulting group – Cyndi Sweeney

- Parents/Caregivers to support navigating pathways, access to resources
- Offer training programs for healthcare workers, teachers and other organizations
- Inclusion library access to free books and workbooks

https://www.simplygoodform.com/resources

https://www.simplygoodform.com/

• Podcast: Hey, Cis!

www.simplygoodform.com/heycis-podcast



Current as of April 23, 2021

Check out all our infographics! Self Care & Cop nces of Trans & Non-binary Youth Unde

and these factors DID NOT affect the outh's ages through care or time

Pathways to

Parental Support Experiences of Trans and Non-Bin>-Under Age 16 in cite Immigrant Famil ences of Trans and Non-Binary Youth Families Under Age 16 In Clini Parent Participants include (youth can be more t Birth/adoptive pas 0% Black Canadian/African A Step-parents Foster parents Other parent figure (Le. grandparents) 0% East Asian 4% Latin American 3% Southeast Asian 2% Diack Carlobean 11% Indigenous 73% White Black Altrican Male tathers Non-binary patent

Binary Youth Under Age 16

Characteristics Of Trans And Non-Binary Youth Under Age

Who are the People Serve Canadian Trans Youth Clir

School Experiences

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12% Latin American

10% Middle Eastern 9% Black Canadian/African American

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Cuthest Asian

G3% White

Cultural ethr

Top 10 External Stressors On

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CAN

918

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Experiences of Tra

What youth

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82%

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50% of youth feel their family understand them.

of Patenta Youth Have In Their 2+ parents 2 parents 1 parents 0 parents living in the home said there is a co-p involved in the you Characteristics Of Parent Participants How Supportive Of Your (Youth's) Gender Ide 50-59 And Expression Is Your Cultural/Ethnic Comr External Stressors On The Families Of Trans Youth 40% 39% tres code, uniform Oth 34% 27% Public 22% 20% Public of

Experiences of Parent

Parents That Youth

Have In Their Lives Have birth/adoptive parent Have dep-parents Have bober parents Have bober parents (Le. grandparents)

Have at least one mother Have at least one father

Avaiding in Source Of Support For Parents Of Trans Yout **RANS** - at a doc wher parents wellor/therapist/in-person support gro Online support group or social media

Indigenous elder or religious leade

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Gender-Affirming Medical Care For Trans & Non-binary Youth Under Age 16 f Trans and Non-Binary Youth Under Age 16 in Cl Parental Conflict Re Parental Conflict 2 with an ether OLDER ager r a LONCER time spent seeking h Parents' W Providers Seen Before Coming to Youth Gender Clinic 240 209 19% 15%

ing care or waiting for care onflict about youth's rentel. ITT & WITH ALT renacial back The FIRST provider youth saw to discuss blockers/hormones Youth were referred to the youth gender clinic by medicine specialisi ther type of provide Or youth did not see any other pro Ineir gender before their first visit at the youth

23

9%



Get the full downloadable PDFs on our website:

www.transyouthcan.ca/ research-type/infographicsposters/

A HUGE THANK YOU! to all the youth and parents across Canada who joined our study and shared their experiences with us.

Without them this research would not be possible. We're so grateful for their trust and choice to work with us to improve care provided to gender-diverse youth and families.

